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Fill in this information to identify you	ur case:
United States Bankruptcy Court for District of New Jers	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	James	
	Write the name that is on your government-issued picture	First name	First name
	identification (for example, your driver's license or passport).	Middle name	Middle name
	unver a license or pasaporty.	Warr	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
	that is not ming this petition.	Business name (if applicable)	Business name (if applicable)
3.		xxx - xx - <u>2</u> <u>7</u> <u>6</u> <u>0</u>	xxx - xx
	Social Security number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 James	Warr	Case number (if known)				
	First Name	Middle Name Last Name					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Your Employer Identification	_	_				
	Number (EIN), if any.	EIN	EIN				
		EIN — — — — — —	EIN				
5.	Where you live		If Debtor 2 lives at a different address:				
		126 Wilson St					
		Number Street	Number Street				
		Boonton, NJ 07005-2235					
		City State ZIP Code	City State ZIP Code				
		Morris					
		County	County				
		If your mailing address is different from the one above fill it in here. Note that the court will send any notices to you at this mailing address.					
		Number Street	Number Street				
		Po Box 335					
		P.O. Box	P.O. Box				
		Boonton, NJ 07005-0335					
		City State ZIP Code	City State ZIP Code				
6.	Why you are choosing <i>this</i>	Charles	Charles				
0.	district to file for bankruptcy	Check one:	Check one:				
		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)				

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Debt	or 1 James	Warı	r	Case number (if known)
	First Name	Middle Name Last	Name	,
Part	2: Tell the Court About Yo	ur Bankruptcy Case		
7.	The chapter of the Bankruptcy Code you are choosing to file under		scription of each, see <i>Notice Required by</i> Also, go to the top of page 1 and check t	y 11 U.S.C. § 342(b) for Individuals Filing for the appropriate box.
8.	How you will pay the fee	details about how you check, or money order a credit card or check to large to Pay The Filing Fee in to Pay The Filing Fee in to Pay The Filing Fee in large may, but is not reformed ficial poverty line that	may pay. Typically, if you are paying the figure 1. If your attorney is submitting your paymenth a pre-printed address. In installments. If you choose this option, in Installments (Official Form 103A). The waived (You may request this option of the equired to, waive your fee, and may do so the applies to your family size and you are unust fill out the Application to Have the	with the clerk's office in your local court for more fee yourself, you may pay with cash, cashier's nent on your behalf, your attorney may pay with , sign and attach the <i>Application for Individuals</i> only if you are filing for Chapter 7. By law, a so only if your income is less than 150% of the unable to pay the fee in installments). If you e Chapter 7 Filing Fee Waived (Official Form
9.	Have you filed for bankruptcy within the last 8 years?	✓ No. ☐ Yes. District ☐ District ☐ District	When MM / D When	DD / YYYY
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	District	MM / DD /	Case number, if known / YYYY Relationship to you Case number, if known
11.	Do you rent your residence?	✓ No. Go to lin ✓ Yes. Fill out		you? ment Against You (Form 101A) and file it

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Debtor 1 James		Warr			Case number (if known)					
	First Name	Middle Name	Last Name		,					
Par	t 3: Report About Any Busi	nesses You	Own as a Sole Proprietor							
12.	Are you a sole proprietor of	☑ No. Go	to Part 4.							
	any full- or part-time business?	Yes. Na	ame and location of business							
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Name of business, if any							
	corporation, partnership, or LLC.	Number	Street							
	If you have more than one sole proprietorship, use a separate sheet and attach it to this									
	petition.	City		State	ZIP Code					
		Check	Check the appropriate box to describe your business:							
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))								
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))								
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))								
		☐ No	ne of the above							
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed un debtor or you of operation	der Subchapter V so that it can secured are choosing to proceed under s	<i>t appropriate deadlir</i> Subchapter V, you n	ou are a small business debtor or a debtor choosing to nes. If you indicate that you are a small business nust attach your most recent balance sheet, statement or if any of these documents do not exist, follow the					
	For a definition of small business	√ No.	I am not filing under Chapter 11.							
	debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, but Bankruptcy Code.	I am NOT a small bu	business debtor according to the definition in the					
		☐ Yes.	I am filing under Chapter 11, I am Bankruptcy Code, and I do not ch		ebtor according to the definition in the definition in the					
		☐ Yes.	am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.							

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Debt	or 1 Jame	s		Warr			Case number (if	known) —		
	First N	ame	Middle Nam	e Last Name			(,		
Part	4: Report if You	u Own or Ha	ave Any H	azardous Property or	Any Prope	rty That Needs	Immediate At	tention	1	
property alleged to imminent hazard to safety? O	Do you own or have property that pose alleged to pose a timminent and identification hazard to public he safety? Or do you	s or is hreat of tifiable ealth or own any	✓ No. ☐ Yes.	What is the hazard?						_ _ _
	property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		If immediate attention is	needed, why	is it needed?					
									- -	
				Where is the property?	Number	Street				-
					City			State	ZIP Code	_

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Debtor 1 James			Warr		Case numb	per (if known)
	First Name	Middle Name	Last Name			
Part	5: Explain Your Efforts to	Receive a Briefii	ng About Credit Counseling			
	Tell the court whether you have received a briefing about credit counseling.	About Debtor 1:		Abo	out Debtor 2 (Spou	se Only in a Joint Case):
		agency within the petition, and I reaction, agency within the petition, but I do Within 14 days a MUST file a copy. I certify that I as approved agency during the 7 day circumstances are requirement. To ask for a 30-cattach a separate obtain the briefing you filed for bank required you to for a your case may be your reasons for bankruptcy. If the court is said receive a briefing you must file a with a copy of the do not do so, you have and is liming a more required courseling because and is liming a more required courseling because and is liming agency.	to e dismissed if the court is dissatisfied with r not receiving a briefing before you filed for tisfied with your reasons, you must still g within 30 days after you file. Sertificate from the approved agency, along he payment plan you developed, if any. If you her case may be dismissed. If the 30-day deadline is granted only for hited to a maximum of 15 days. If to receive a briefing about credit		agency within the petition, and I received a brief agency within the petition, but I do Within 14 days at MUST file a copy I certify that I ask approved agency during the 7 days circumstances in requirement. To ask for a 30-dattach a separate obtain the briefing you filed for bank required you to fill Your case may be your reasons for bankruptcy. If the court is sat receive a briefing You must file a court with a copy of the do not do so, you Any extension of cause and is limit.	the dismissed if the court is dissatisfied with not receiving a briefing before you filed for disfied with your reasons, you must still g within 30 days after you file. The ertificate from the approved agency, along e payment plan you developed, if any. If you ur case may be dismissed. If the 30-day deadline is granted only for ited to a maximum of 15 days.
		☐ Active dut	person, by phone, or through the internet, even after I reasonably tried to do so. I I am currently on active military duty in a military combat zone.		☐ Active duty	person, by phone, or through the internet, even after I reasonably tried to do so. I am currently on active military duty in a military combat zone.
			ou are not required to receive a briefing nseling, you must file a motion for waiver of			u are not required to receive a briefing nseling, you must file a motion for waiver of

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Debt	tor 1	James		Warr		Case nun	nber	(if known)	
		First Name	Middle N	lame Last Name				,	
Par	t 6: Answe	r These Question	s for R	eporting Purposes					
16. What kind of debts do you have?		16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.						
			16h	Are your debts primarily hus	inas	s debts? Business debts are debts	that v	you incurred to obtain money	
			100.			rough the operation of the business			
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c.	State the type of debts you ow	ve th	at are not consumer debts or busine	ess d	ebts.	
47	Are you filin	og under Chanter 72	⊴			- 0			
17.	Are you min	g under Chapter 7?		No. I am not filing under Cha	•				
	exempt prop and adminis paid that fur	nate that after any perty is excluded trative expenses and nds will be available ion to unsecured	е			Do you estimate that after any exem paid that funds will be available to d			
			1	1-49		25,001-50,000 50,000-	100.0	000 Mars than 400 000	
18.	estimate tha	reditors do you t you owe?		100-199		2 5,001-50,000 3 50,000-	100,0	00 🛥 More than 100,000	
19.	How much of assets to be	lo you estimate you worth?	r ☑	\$0-\$50,000 \$50,001-\$100,000		\$1,000,001-\$10 million \$10,000,001-\$50 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion	
				\$100,001-\$500,000	$\overline{\Box}$	\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion	
				\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion	
20.	How much of liabilities to	do you estimate you he?	r 🔟	\$0-\$50,000 \$50,001-\$100,000		\$1,000,001-\$10 million \$10,000,001-\$50 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion	
	nabilities to			\$100,001-\$100,000	ă	\$50,000,001-\$50 million	ă	\$1,000,000,001-\$10 billion	
				\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion	
Par	t 7: Sign Be	elow							
	c 7. Oigit Do								
Foi	r you	I have e	xamined	this petition, and I declare und	er p	enalty of perjury that the information	prov	ided is true and correct.	
						that I may proceed, if eligible, under each chapter, and I choose to proce		opter 7, 11,12, or 13 of title 11, United	
						• • •		ey to help me fill out this document, I	
				nd read the notice required by 1				to holp the time dut time decament, i	
		I reques	t relief in	accordance with the chapter o	f title	e 11, United States Code, specified i	n this	s petition.	
			tcy case			property, or obtaining money or prop or imprisonment for up to 20 years,			
		Y .	-1 !-	- Marin					
		-	s/ Jame	s Warr ırr, Debtor 1					
				on <u>05/17/2023</u>					
				MM/ DD/ YYYY					

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Debtor 1	James	Warr	Case number (if known)
	First Name	Middle Name Last Name	
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under Chapter 7, 11, 12, o each chapter for which the person i 11 U.S.C. § 342(b) and, in a case in	ned in this petition, declare that I have informed the debtor(s) about eligibility to r 13 of title 11, United States Code, and have explained the relief available under s eligible. I also certify that I have delivered to the debtor(s) the notice required by a which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry s filed with the petition is incorrect.
		/s/ Scott J Goldstein Signature of Attorney for Debte	Date <u>05/17/2023</u> MM / DD / YYYY
		Scott J Goldstein Printed name Law Offices of Scott J. Gold Firm name 280 West Main Street	stein, LLC
		Number Street Denville City	NJ 07834 State ZIP Code
		Contact phone (973) 453-2838	Email address sig@sgoldsteinlaw.com
		16472004 Bar number	NJ State

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Fill in this information	n to identify your case	:			
Debtor 1	_ James		Warr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:			District of New Jersey		
Case number					
(if known)		<u>. </u>			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Your assets Value of what you own \$0.00 \$25,562.21 \$25,562.21
Part 2. Summanze four Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$99,915.00
Your total liabilities	\$99,915.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,460.07
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,063.14

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Debt	or 1	James		Warr	<u> </u>	Case number (if known)					
		First Name	Middle Name	Last Name							
Part	4: Answer	These Ques	tions for Administr	ative and Statistical F	Records						
	_		nder Chapters 7, 11, or ort on this part of the fo	13? orm. Check this box and su	bmit this form to the	court with your o	ther schedu	ules.			
	Your debts a family, or ho	usehold purpose are not primarily	nsumer debts. Consul e." 11 U.S.C. § 101(8).	mer debts are those "incurr Fill out lines 8-9g for statist I have nothing to report on	ical purposes. 28 U	.S.C. § 159.					
8. Fr o	_	\$6,627.83									
9. Co	py the follow	ing special cate	gories of claims from	Part 4, line 6 of Schedule I	E/F:	Total claim					
	From Part 4 c	on Schedule E/F	c, copy the following:								
9	a. Domestic s	support obligatio	ns (Copy line 6a.)				\$0.00				
g	b. Taxes and	certain other de	bts you owe the govern	nment. (Copy line 6b.)			\$0.00				
g	c. Claims for	death or person	al injury while you were	e intoxicated. (Copy line 6c.)		\$0.00				
g	d. Student loa	ans. (Copy line 6	Sf.)				\$0.00				
9	e.Obligations claims. (Co		separation agreement	or divorce that you did not	report as priority		\$0.00				
9	f. Debts to pe	nsion or profit-s	haring plans, and other	similar debts. (Copy line 6	h.) Г	+	\$0.00				
g	g. Total . Add	lines 9a through	n 9f.				\$0.00				

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		D(<u> icumeni Pac</u>	<u>16 11 01 59</u>	
Fill in this inform	nation to identify y	our case and this filing	g:		
Debtor 1	James		Warr		
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for t	he: District of New J	ersey		
Case number					Check if this is an amended filing
					 amended ming
~					

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residenc	e, Building, Land, or Other Real Estate	You Own or Have an	Interest In
1.	Do y	ou own or have any legal or equitabl	e interest in any residence, building, land, or simil	ar property?	
	₫ №	No. Go to Part 2.			
	□ A	es. Where is the property?			
	1.1	Street address, if available, or other	What is the property? Check all that apply. Single-family home Duplex or multi-unit building		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
		description	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property 	Current value of the entire property?	Current value of the portion you own?
		City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of y (such as fee simple, tena a life estate), if known.	our ownership interest ancy by the entireties, or
		County	Who has an interest in the property? Check one.	a life estate), il kilowii.	
			 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	Check if this is comr (see instructions)	nunity property
			Other information you wish to add about this ite property identification number:	-	
2.			wn for all of your entries from Part 1, including any umber here		\$0.00
Pa	rt 2:	Describe Your Vehicles			
		, , , , , , , , , , , , , , , , , , , ,	nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Control		es
3.	Ca	ers, vans, trucks, tractors, sport utility	y vehicles, motorcycles		
		No			
		Yes			

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	3.1	Make:	Jeep	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
		Model: Gra	nd Cherokee	☑ Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
				□ Debtor 2 only□ Debtor 1 and Debtor 2 only	Creditors Who have Clair	ins Secured by Froperty.
		Year:	2013	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	60000	☐ Check if this is community property (see	\$13,425.00	\$13,425.00
		Other information:		instructions)		
4.	Wate	ercraft, aircraft, motor h	nomes. ATVs a	nd other recreational vehicles, other vehicles, and	accessories	
			-	watercraft, fishing vessels, snowmobiles, motorcycle a		
	√ N		, p =	,		
	_ Y					
	_					
	4.1	Make:		Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
		Model:		☐ Debtor 1 only	the amount of any secure	ed claims on Schedule D:
				Debtor 2 onlyDebtor 1 and Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
		Year:		☐ At least one of the debtors and another	Current value of the	Current value of the
		Other information:		_	entire property?	portion you own?
				Check if this is community property (see instructions)		
				,		
5.				vn for all of your entries from Part 2, including any umber here		\$13,425.00
	you	nave attached for Fart	z. Wille tilat il	uniber nere		
Da	rt 3:	Describe Vour	· Darsonal a	and Household Items		
ГС	III J.	Describe rour	rei sonai a	and Household Rems		
Do y	ou ow	n or have any legal or	equitable inter	est in any of the following items?		Current value of the
						portion you own? Do not deduct secured
						claims or exemptions.
6.	Hous	sehold goods and furni	ishings			
	Exan	mples: Major appliances	s, furniture, liner	ns, china, kitchenware		
		No				
	_ √1 Y	es. Describe		1.06		40.500.00
	_		Household goo	ds & furnishings		\$3,500.00
_						
7.		tronics				
	Exan	•		deo, stereo, and digital equipment; computers, printer cluding cell phones, cameras, media players, games	s, scanners; music	
		No				
	√ Y	es. Describe	TV DVD Playe	r, Movies, Laptop, Cell Phone		\$1,000.00
			ı v, DvD Flaye	i, iviovies, Laptop, Oeii Filofie		φ1,000.00

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8.	Collectibles of value		
		rrines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or lections; other collections, memorabilia, collectibles	
	□ No	ections, other concentris, memorabilia, concentries	
	T Voc Doscribo		
	100. 2000/100	Books & Photos	\$350.00
9.	Equipment for sports and h	ohhies	
٥.		oblic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	
	kayaks; carpentry	tools; musical instruments	
	☑ No		
	Yes. Describe		
10.	Firearms		
	•	tguns, ammunition, and related equipment	
	☑ No		•
	Yes. Describe		
	L		I
11.	Clothes		
	Examples: Everyday clothes	, furs, leather coats, designer wear, shoes, accessories	
	□ No		•
	Yes. Describe	Wearing apparel	\$500.00
	L		I
12.	Jewelry Everydey Everydey iswelry	anatuma inwalny anggamant ringa wadding ringa hairlaam inwalny watahaa gama gald	
	silver	, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	☐ No		
	✓ Yes. Describe	Costume jewelry & wedding bands	\$700.00
		occurre journey a modaling same	
13.	Non-farm animals		
	Examples: Dogs, cats, birds,	horses	
	₫ No		
	Yes. Describe		
14.	Any other personal and hou	sehold items you did not already list, including any health aids you did not list	
	☑ No		
	Yes. Give specific		
	information		
15	Add the dollar value of all o	f your antries from Part 3, including any entries for pages you have attached	
15.		f your entries from Part 3, including any entries for pages you have attached r here	\$6,050.00
Pa	rt 4: Describe Your	Financial Assets	
	ou own or have any legal or east in any of the following?	equitable Current value of the portion you own? Do not deduct secured claims or exemptions.	

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16.	Cash Examples: Money you	ı have in your wallet, in your ho	ome, in a safe deposit box, and on hand when y	you file your petition	
	☐ No				
	_			. Cash:	\$200.00
17.	Deposits of money				
			ounts; certificates of deposit; shares in credit ur multiple accounts with the same institution, list		
	☐ No				
	√ Yes		Institution name:		
		17.1. Checking account:	Lakeland Bank acct ending 6317		\$4,437.21
18.	Bonds, mutual funds,	or publicly traded stocks			
	Examples: Bond funds	s, investment accounts with bro	okerage firms, money market accounts		
	√ No				
	☐ Yes	Institution or issuer name:			
19.	Non-publicly traded s LLC, partnership, and		orated and unincorporated businesses, incl	uding an interest in an	
	√ No				
	Yes. Give specific				
	information about	Name of outitur		0/ of our orabin.	
	them	Name of entity:		% of ownership:	
			_		
		-		<u> </u>	
20	Covernment and comm		tiable and non-negotiable instruments		
20.		_	iers' checks, promissory notes, and money ord	ore	
			nefer to someone by signing or delivering them.		
	☑ No				
	Yes. Give specific information about				
	them	Issuer name:			

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21.	Retirement or pension		1/k) 402/	(b) thrift covings accounts or other pension or profit charing plans	
		IKA, EKISA, Keogii, 40	1(K), 403((b), thrift savings accounts, or other pension or profit-sharing plans	
	☑ No				
	Yes. List each account separately.	Type of account:	Institutio	on name:	
		401(k) or similar plan:			
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
00					
22.	Security deposits and				
				t you may continue service or use from a company	
	Examples: Agreements others	s with landlords, prepaid	rent, pub	olic utilities (electric, gas, water), telecommunications companies, or	
	☐ No				
	√ Yes	In	stitution n	name or individual:	
		Security deposit on rer	ntal unit:	Clifford Keezer	
				131 Wilson St Boonton, NJ 07005	\$1,450.00
				Boomon, No 07003	
23.	Annuities (A contract for	or a periodic payment of	money to	o you, either for life or for a number of years)	
	√ No				
	☐ Yes	Issuer name and descr	iption:		
0.4	Internate in an advant	i IDA in		In a ARI F	
24.		529A(b), and 529(b)(1).	-	ified ABLE program, or under a qualified state tuition program.	
	✓ No	020, ((b), and 020(b)(1).			
	Yes	Institution name and de	carintian	. Separately file the records of any interests.11 U.S.C. § 521(c):	
	res	mstitution name and de	sscription.	. Separately life the records of any interests. IT 0.5.6. § 521(6).	
		_			-
					-
25.	Trusts, equitable or fu	ture interests in prope	rty (othe	r than anything listed in line 1), and rights or powers exercisable	
	✓ No				
	Yes. Give specific				
	information about th	nem			

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26.	Patents, copyrights, trademarks, trade Examples: Internet domain names, webs	secrets, and other intellectual property ites, proceeds from royalties and licensing agreements	
	√ No		
	Yes. Give specific information about them		
27.	Licenses, franchises, and other genera	I intangibles enses, cooperative association holdings, liquor licenses, professional licens	00
		enses, cooperative association notdings, liquol licenses, professional licens	35
	✓ No ☐ Yes. Give specific		
	information about them		
Mone	y or property owed to you?		Current value of the
			portion you own?Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	☑ No		
	Yes. Give specific information about	Federal:	
	them, including whether you already filed the returns and	State:	
	the tax years		
		Local:	
29.	Family support		
	Examples: Past due or lump sum alimon settlement	y, spousal support, child support, maintenance, divorce settlement, property	
	√ No		
	Yes. Give specific information	Alimony:	
		Maintenance:	
		Support:	
		Divorce settlem	ent:
		Property settler	nent:
30.	Other amounts someone owes you		
50.	Examples: Unpaid wages, disability insur	rance payments, disability benefits, sick pay, vacation pay, workers' compensition to be compared to some one else	sation,
	✓ No	•	
	Yes. Give specific information		

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31.	Interests in insurance policies Examples: Health, disability, or life insuran	ce; health savings account (HS	A); credit, homeowner's, or renter's insuran	се
	√ No	·		
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				<u> </u>
		-		
32.	Any interest in property that is due you a lift you are the beneficiary of a living trust, exproperty because someone has died.		ance policy, or are currently entitled to rece	ive
	☑ No			
	☐ Yes. Give specific information			
33.	Claims against third parties, whether or	not you have filed a lawsuit o	r made a demand for payment	
	Examples: Accidents, employment dispute	es, insurance claims, or rights to	sue	
	☑ No			
	Yes. Describe each claim			
34.	Other contingent and unliquidated claim claims	s of every nature, including o	ounterclaims of the debtor and rights to	o set off
	√ No			
	Yes. Describe each claim			
	L			
35.	Any financial assets you did not already	list		
	☑ No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$6,087.21
Pa	rt 5: Describe Any Business-	Related Property You (Own or Have an Interest In. Lis	t any real estate in Part 1.
37.	Do you own or have any legal or equitab	le interest in any business-re	lated property?	
	☑ No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions yo	u already earned		
	√ No	-		
	Yes. Describe			

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39.	Office equipment, furnish	ngs, and supplies		
		d computers, software, modems, printers, copiers, fax machines, rugs, to	elephones, desks, chairs,	
	electronic devi	3 5		
	✓ No			
	Yes. Describe			
40.		ment, supplies you use in business, and tools of your trade		
	✓ No			
	Yes. Describe			
41.	Inventory			
	✓ No			
	Yes. Describe			
	100. 20001150			
42.	Interests in partnerships	r joint ventures		
	√ No			
	Yes. Describe			
	N:	ne of entity:	% of ownership:	
			,	
	_			
	_			
	_			
43.	Customer lists, mailing li	ts, or other compilations		
	√ No			
	Yes. Do your lists inc	de personally identifiable information (as defined in 11 U.S.C. § 1016	41A)) ?	
	☐ No			
	Yes. Describe			
44	Any hyginogo related are	sorti, voju did not obroody liet		
44.	✓ No	erty you did not already list		
	Yes. Give specific			
	information			
	_			
	_			
	_			
	_			
	_		_	
	_			
1E	Add the deller value of a	of your entries from Part 5. including any entries for negative.	a attached	
45.	for Part 5. Write that num	of your entries from Part 5, including any entries for pages you hav er here	- attached	\$0.00

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Pai	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a lf you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	☐ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	
	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes]
48.	Crops—either growing or harvested	_
	☑ No	
	Yes. Give specific information] ———
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	_
	☑ No	
	☐ Yes] ———
50.	Farm and fishing supplies, chemicals, and feed	_
	☑ No	
	☐ Yes]
51.	Any farm- and commercial fishing-related property you did not already list	_
	☑ No	_
	Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pai	Texaction of the control of the cont	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	✓ No	7
	Yes. Give specific information	
		_
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Pa	rt 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		→	\$0.00
56.	Part 2: Total vehicles, line 5	\$13,425.00		
57.	Part 3: Total personal and household items, line 15	\$6,050.00		
58.	Part 4: Total financial assets, line 36	\$6,087.21		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$25,562.21	Copy personal property total	+ \$25,562.21
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$25,562.21

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Fill in this informatio	n to identify your case	э:		
Debtor 1	James		Warr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:		District of New Jersey	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt		
 Which set of exemptions are you claiming? Cl You are claiming state and federal nonbankr You are claiming federal exemptions. 11 U.S For any property you list on Schedule A/B that 	ruptcy exemptions. 11 U.S S.C. § 522(b)(2)	.C. § 522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 2013 Jeep Grand Cherokee Line from Schedule A/B: 3.1	\$13,425.00	\$4,450.00 100% of fair market value, up to any applicable statutory limit \$8,975.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)
Brief description: Household goods & furnishings Line from Schedule A/B: 6	\$3,500.00	\$3,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
3. Are you claiming a homestead exemption of m (Subject to adjustment on 4/01/25 and every 3 y ✓ No ☐ Yes. Did you acquire the property covered b ☐ No ☐ Yes	vears after that for cases f		

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Debtor 1 **James** Warr Case number (if known) _ First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Specific laws that allow exemption Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ \$1,000.00 11 U.S.C. § 522(d)(3) \$1,000.00 TV, DVD Player, Movies, Laptop, Cell Phone ☐ 100% of fair market value, up to any applicable statutory limit I ine from Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) \$350.00 \$350.00 Books & Photos 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: \$500.00 11 U.S.C. § 522(d)(3) \$500.00 Wearing apparel 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: 11 U.S.C. § 522(d)(4) \$700.00 \$700.00 Costume jewelry & wedding bands 100% of fair market value, up to any applicable statutory limit I ine from Schedule A/B: 12 Brief description: $\sqrt{}$ \$200.00 11 U.S.C. § 522(d)(5) \$200.00 Cash 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: 16 Brief description: $\mathbf{\Delta}$ 11 U.S.C. § 522(d)(5) \$4.437.21 \$4,437.21 Lakeland Bank acct ending 6317 ☐ 100% of fair market value, up Checking account to any applicable statutory limit Line from 17 Schedule A/B: Brief description:

Clifford Keezer 131 Wilson St Boonton, NJ 07005

Security deposit on rental unit

Line from Schedule A/B:

 $\sqrt{}$

\$1,450.00

\$1,450.00

100% of fair market value, up to any applicable statutory limit

11 U.S.C. § 522(d)(5)

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			Document	Page 23 01 59)		
Fill in this informatio	on to identify your case:						
Debtor 1	James First Name	Middle Name	Warr Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
		Wildale Harrie		la raas.			
United States Bank	kruptcy Court for the:		District of New J	ersey			
Case number (if known)							if this is an led filing
Official Form	n 106D						
Schedule	D: Creditors	s Who H	łave Clair	ms Secure	d by Prope	erty	12/15
case number (if known of the control of the contro	have claims secured by box and submit this for of the information below.	your property? m to the court w	? vith your other sche	dules. You have nothin			Column C Unsecured
	t 2. As much as possible				Do not deduct the value of collateral.	collateral that supports this claim	portion If any
2.1		Describe	the property that s	ecures the claim:			
Creditor's Name Number St	treet	As of the	date you file, the clai	im ie: Chark all that			
City	State ZIP Code	apply.	acte you me, the clai	in is. Officer all triat			
City Who owes the	debt? Check one.	☐ Conting	gent				
Debtor 1 onl		☐ Unliqui	idated				
Debtor 2 onl	у	☐ Dispute	ed				
Debtor 1 and	d Debtor 2 only		lien. Check all that				
At least one another	of the debtors and		reement you made (ured car loan)	(such as mortgage			
Check if this community	s claim relates to a debt	lien)	ory lien (such as tax	•			
Date debt was i		_	nent lien from a laws (including a right to				
		_	=				

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Debtor 1	James		Warr		Case numb	er (if known)	
	First Name	Middle Name	Last Name				
Part 1:	Additional Page After listing any er 2.3, followed by 2.4		number them beginning wi	An Do val	nount of claim not deduct the ue of lateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2		Describe the	he property that secures the cla	aim:			_
Creditor's	s Name						-
Number	Street	As of the da	ate you file, the claim is: Check all	that			
	State ZI ves the debt? Check on or 1 only	apply.	ent				
	or 2 only	☐ Dispute					
	or 1 and Debtor 2 only	Nature of li	ien. Check all that apply.				
☐ At lea	ast one of the debtors a		ement you made (such as mortgred car loan)	gage			
Chec	ck if this claim relates to munity debt	o a Statutor	y lien (such as tax lien, mechani	ic's			
	bt was incurred		ent lien from a lawsuit ncluding a right to offset)				
		Last 4 digit	ts of account number	- 			
Add the	e dollar value of your e	ntries in Column A on th	nis page. Write that number her	e:	\$	0.00	
If this is here:	s the last page of your	form, add the dollar valu	ue totals from all pages. Write th	hat number		0.00	

Case 23-14641-SLM Doc 1 Filed 05/30/23 Entered 05/30/23 12:22:02 Desc Main Fill in this information to identify your case: Debtor 1 Warr **James** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name **District of New Jersey** United States Bankruptcy Court for the: Check if this is an Case number (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total **Priority** Nonpriority amount amount Last 4 digits of account number __ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that Number apply. Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: ■ Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the Debtor 1 and Debtor 2 only government At least one of the debtors and another Claims for death or person injury while you Check if this claim is for a community debt were intoxicated Is the claim subject to offset? Other. Specify ■ No ☐ Yes

Case 23-14641-SLM Doc 1 Filed 05/30/23 Entered 05/30/23 12:22:02 Page 26 of 59 Debtor 1 Case number (if known). First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** \$3,486.00 4.1 **BANK OF AMERICA** Last 4 digits of account number 5864 Nonpriority Creditor's Name When was the debt incurred? 07/01/2022 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. PO BOX 982238 Contingent Number Street Unliquidated **EL PASO, TX 79998** Disputed ZIP Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Student loans ✓ Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes \$3,160.00 **BANK OF AMERICA** Last 4 digits of account number 0816 Nonpriority Creditor's Name When was the debt incurred? 04/27/2020 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply.

Contingent

Disputed

Unliquidated

☐ Student loans

similar debts

Other. Specify CreditCard

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or

Debts to pension or profit-sharing plans, and other

divorce that you did not report as priority claims

PO BOX 982238

☑ Debtor 1 only

☐ Debtor 2 only

EL PASO, TX 79998

Street

Who incurred the debt? Check one.

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

ZIP Code

Number

✓ No ☐ Yes Case 23-14641-SLM Doc 1 Filed 05/30/23 Entered 05/30/23 12:22:02 Desc Main

Debtor 1 James Doverme
First Name Middle Name Last Name

Your NONPRIORITY Unsecured Claims - Continuation Page

Part 2:

Doweument Page 27 of 59

Case number (if known) _

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$11.735.00 4.3 **Barclays Bank Delaware** Last 4 digits of account number 1915 Nonpriority Creditor's Name When was the debt incurred? 12/22/2016 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. **PO Box Box 8801** Contingent Number Street Unliquidated Wilmington, DE 19899 City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? FlexibleSpendingCreditCard **☑** No ☐ Yes \$5,692.00 **CITIBANK** Last 4 digits of account number 7128 Nonpriority Creditor's Name When was the debt incurred? 04/21/2020 Attn: Centralized Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 790034 Contingent Number Street Unliquidated Saint Louis, MO 63179 State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts Check if this claim is for a community debt $\mathbf{\Lambda}$ Other. Specify Is the claim subject to offset? CreditCard **☑** No

☐ Yes

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Debtor 1

First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.5	CITIBANK Nonpriority Creditor's Name Attn: Centralized Bankruptcy PO Box 790034 Number Street Saint Louis, MO 63179 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Last 4 digits of account number 1928 When was the debt incurred? 11/18/2021 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	\$1,979.00
[]	☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	similar debts Other. Specify CreditCard	\$9,764.00
4.6	DISCOVER BANK Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30939 Number Street Salt Lake City, UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number 8818 When was the debt incurred? 03/30/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	

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Debtor 1

First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims	s - Continuation Page	
After listing any entries on this page, number them be	eginning with 4.5, followed by 4.6, and so forth.	Total claim
4.7 ELAN FINANCIAL SERVICE Nonpriority Creditor's Name PO BOX 790084 Number Street SAINT LOUIS, MO 63179 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 4166 When was the debt incurred? 04/01/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard	\$28,023.00
4.8 ELAN FINANCIAL SERVICE Nonpriority Creditor's Name PO BOX 790084 Number Street SAINT LOUIS, MO 63179 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number 5378 When was the debt incurred? 06/01/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify FlexibleSpendingCreditCard	<u>\$16,324.00</u>

☐ Yes

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Debtor 1 James Doverme
First Name Middle Name Last Name

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Case number (if known) ___

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$9,230.00 4.9 **FNB OMAHA** Last 4 digits of account number 6399 Nonpriority Creditor's Name When was the debt incurred? 11/01/2021 **PO BOX 3412** As of the date you file, the claim is: Check all that apply. Number Street Contingent **OMAHA, NE 68103** City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No CreditCard ☐ Yes \$10,522.00 4.10 **RBS CITIZENS NA** Last 4 digits of account number 9769 Nonpriority Creditor's Name When was the debt incurred? 12/12/2018 **6 CORPORATE DR** As of the date you file, the claim is: Check all that apply. Number Street Contingent SHELTON, CT 06484 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify

CreditCard

☑ No

☐ Yes

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Debtor 1

Case number (if known) _

First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the ar for each ty	nounts of certain types of unsecured claims. This inforn be of unsecured claim.	nation is for s	stat	istical reporting purposes only. 28
				Total claim
Total claims	6a. Domestic support obligations	6a.		\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.		\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d	+	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.		\$0.00
				Total claim
Total claims	6f. Student loans	6f.		\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i	+	\$99,915.00
	6j. Total. Add lines 6f through 6i.	6j.		\$99,915.00

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Fill in this information	n to identify your case	:		
Debtor 1	James		Warr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		District of New Jersey	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom you h	ave the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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Fill in this informa	tion to identify your c	ase:				
Debtor 1	James		Warr			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for th	e:	District of New Jersey	<u>, </u>		
Case number (if known)						Check if this is an amended filing
Official For	m 106H			_		
Schedule	H: Your C	odebtors				12/15
together, both are	equally responsible	for supplying corre	ct information. If more s	pace is needed, copy t	he Additional Page, fill	o married people are filing it out, and number the entries number (if known). Answer
1. Do you hav ✓ No	re any codebtors? (If	you are filing a joint	t case, do not list either sp	pouse as a codebtor.)		
Yes						
Idaho, Louis	siana, Nevada, New I		nity property state or term , Texas, Washington, and		perty states and territor	ies include Arizona, California,
✓ No. Go t						
	your spouse, former	spouse, or legal equ	uivalent live with you at th	ne time?		
☐ No ☐ Yes. I	In which community s	tate or territory did y	you live?	Fill	in the name and current	address of that person.
Name						
Numb	er Street					
City		State ZIP Co	de			
again as a d	codebtor only if that	person is a guarant	ide your spouse as a cod for or cosigner. Make sui 6 (Official Form 106G). Us	re you have listed the o	reditor on Schedule D	
Column 1: Yo	our codebtor			Columi	2: The creditor to who	om vou owe the debt
					k all schedules that app	
3.1					chedule D, line	
Name					chedule E/F, line	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Number

City

Street

State

ZIP Code

☐ Schedule G, line _____

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Fill in this inf	formation to identify your c	case:							
Debtor 1	James	v	/arr						
	First Name	Middle Name La	st Name						
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name La	st Name				Check if this is:		
United Stat	es Bankruptcy Court for th		rict of New Jers	ev			An amended	filing	
Case numb	, ,		TOU OF NEW OCTS	<u>cy</u>		•	A supplement chapter 13 inc		stpetition ne following date
(if known)							MANA / DD / VV	200	
0.00	- 4001						MM / DD / YY	YY	
Official	Form 106I								
Sched	ule I: Your In	icome							12/15
spouse is not additional pa	t filing with you, do not in	t filing jointly, and your spo clude information about yo case number (if known). A	our spouse. If m	ore s	pace is nee				
Fill in your information.	our employment tion.		Debtor 1				Debtor 2 or	non-filing s	pouse
	ave more than one job, separate page with	Employment status	✓ Employed	ı 🗆 N	ot Employe	ed	☐ Employed ☑	Not Employ	/ed
	ion about additional	Occupation	Accts Receiv	Accts Receivable					
	part time, seasonal, or	Employer's name	Electronic Dr	ives 8	& Controls I	nc			
Occupat	bloyed work.	Employer's address	17 Eastmans Number Stree				Number Street		
or nome	maker, if it applies.								
			Parsippany, I	NJ 07	054 State	Zip Code	City	State	Zip Code
		How long employed ther	e?						
Part 2: Gi	ive Details About Mor	athly Income							
		-							
	e monthly income as of the output of the court of the cou	ne date you file this form. If	you have nothir	ng to r	eport for ar	ny line, write S	\$0 in the space. Inclu	de your non-	filing spouse
	your non-filing spouse ha ace, attach a separate she	ve more than one employer eet to this form.	, combine the in	forma	tion for all e	employers for	r that person on the li	nes below. If	you need
					For	Debtor 1	For Debtor 2 or non-filing spouse	•	
		, and commissions (before alculate what the monthly w		2.	\$	54,748.33 <u></u>	\$0.00	<u>)</u>	
3. Estimate	e and list monthly overtin	ne pay.		3.	+	\$1,879.50	+\$0.0	0_	
4. Calculat	te gross income. Add line	2 + line 3.		4.		6,627.83	\$0.0	0	

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 Debtor 1
 James
 Warr
 Case number (if known)

 First Name
 Middle Name
 Last Name

			For Debtor 1		or Debtor 2 or on-filing spouse	
	Copy line 4 here→	4.	\$6,627.83	_	\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$2,059.71		\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	_	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	_	\$0.00	
	5e. Insurance	5e.	\$0.00	_	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	_	\$0.00	
	5g. Union dues	5g.	\$0.00	_	\$0.00	
	5h. Other deductions. Specify: See additional page	5h.	+ \$590.95	+_	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$2,650.67		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,977.16	_	\$0.00	
8.	List all other income regularly received:					
O.	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		\$0.00	
	8b. Interest and dividends	8b.	\$0.00	_	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.	Ψ0.00	_	ψο.σο	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	_	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	_	\$0.00	
	8e. Social Security	8e.	\$0.00		\$1,482.90	
	8f. Other government assistance that you regularly receive			_		
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00	_	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	_	\$0.00	
	8h. Other monthly income. Specify:	8h.	+\$0.00	+_	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00		\$1,482.90	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$3,977.16	+	\$1,482.90	\$5,460.06
11.	State all other regular contributions to the expenses that you list in Scheo	lule J.				
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a			-		
	Specify:			_	11. •	+ \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical		-	come	e. Write that 12.	\$5,460.06 Combined
13.	Do you expect an increase or decrease within the year after you file this for ✓ No. ☐ Yes. Explain:	orm?				monthly income

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Debtor 1	James		Warr	Case number (if known)
	First Name	Middle Name	Last Name	
				Amount
				, , , , , , , , , , , , , , , , , , ,
5h. Other D	Deductions For Debto	or 1		
S125M				\$534.84
				\$56.12

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			Bodament				
Fil	ll in this information to ide	entify your case	9:				
С		ımes	Warr		Check if this is:		
		st Name	Middle Name Last Name		☐ An amended	filing	
	Debtor 2 Spouse, if filing) Firs	st Name	Middle Name Last Name	_		t showing po	stpetition chapter 13 ng date:
L	Inited States Bankruptcy	Court for the:	District of Nev	v Jersey			
	Case number				MM / DD / YYY	Y	
C O	fficial Form 10	 6.1					
	chedule J: Y						12/15
			. If two married people are filing to this form. On the top of any addit				
Pa	art 1: Describe Your	Household					
		riouscrioiu					
1.	Is this a joint case? No. Go to line 2.						
	Yes. Does Debtor 2	live in a sena	rate household?				
		. IIVC III a Sepai	ate nousenoid:				
	☐ Yes. Debto	or 2 must file C	official Form 106J-2, Expenses for	Separate Household of Del	otor 2.		
2.	Do you have depended	nts?	☑ No				
	Do not list Debtor 1 and Debtor 2.	d	Yes. Fill out this information for each dependent	Dependent's relationship Debtor 1 or Debtor 2	to Depend age		Ooes dependent live vith you?
	Do not state the dependent	dents'	·				☐ No. ☐ Yes.
							☐ No. ☐ Yes.
							☐ No. ☐ Yes.
							☐ No. ☐ Yes.
							☐ No. ☐ Yes.
3.	Do your expenses incl	lude	√No				
	expenses of people of yourself and your depo		□ _{Yes}				
Pä	art 2: Estimate Your	⁻ Ongoing M	onthly Expenses				
			ruptcy filing date unless you are s a supplemental <i>Schedule J</i> , che				
			n government assistance if you ki		e ioim and illi ill u		penses
su	ich assistance and have	included it on	Schedule I: Your Income (Officia	l Form 106l.)		Tour ex	perises
4.	The rental or home ow for the ground or lot.	nership exper	nses for your residence. Include fi	irst mortgage payments and	I any rent 4.		\$1,800.00
	If not included in line 4	4:					
	4a. Real estate taxes				4a.		\$0.00
	4b. Property, homeown	ner's, or renter's	s insurance		4b.		\$44.67
	4c. Home maintenance	e, repair, and u	pkeep expenses		4c.		\$0.00
	4.1.11				4d.		00.02

4d. Homeowner's association or condominium dues

\$0.00

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 Debtor 1
 James
 Warr
 Case number (if known)

 First Name
 Middle Name
 Last Name

	You	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
5. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$225.00
6b. Water, sewer, garbage collection	6b	\$60.00
6c. Telephone, cell phone, Internet, satellite, and cable services		\$450.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$875.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9	\$160.00
). Personal care products and services	10.	\$80.00
. Medical and dental expenses	11	\$150.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$650.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
4. Charitable contributions and religious donations	14.	\$40.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$75.65
15b. Health insurance	15b	\$164.90
15c. Vehicle insurance	15c	\$137.92
15d. Other insurance. Specify:	15d	\$0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
	17b.	\$0.00
17b. Car payments for Vehicle 2	17c.	\$0.00
17c. Other. Specify:	17d.	\$0.00
17d. Other. Specify:		ψ0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
Other payments you make to support others who do not live with you.		.
Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income).	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	tor 1	James		Warr	Case number	(if known)
		First Name	Middle Name	Last Name		
21.	Other. Spe	cify:			21.	+\$0.00_
22.	Calculate y	our monthly expe	enses.			
	22a. Add lir	nes 4 through 21.			22a.	\$5,063.14
	22b. Copy	line 22 (monthly ex	xpenses for Debtor 2), i	f any, from Official Form 106J-2	22b.	\$0.00
	22c. Add lir	ne 22a and 22b. Th	he result is your monthl	y expenses.	22c.	\$5,063.14
23.	Calculate v	our monthly net i	ncome.			
	-	•	nined monthly income) f	rom Schedule I.	23a.	\$5,460.07
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	- \$5,063.14
	23c. Subtra	act your monthly ex	xpenses from your mon	thly income.		
	The re	esult is your month	nly net income.		23c.	\$396.93
24.	Do you exp	pect an increase o	r decrease in your exp	enses within the year after you file	e this form?	
				car loan within the year or do you of a modification to the terms of you		
	√ No. ☐Yes.	None				

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Fill in this information	to identify your case	:			
Debtor 1	James		Warr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
Jnited States Bankr	uptcy Court for the:		District of New Jersey		
Case number (if known)					Ì

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you was a second to second a second at the NOT are	ttamas ta halm vas fill aut hamlmuntas farma?
Did you pay or agree to pay someone who is NOT an a	ttorney to neip you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the	summary and schedules filed with this declaration and that they are true and correct.
X /s/ James Warr	
James Warr, Debtor 1	
Date <u>05/17/2023</u> MM/ DD/ YYYY	
WINN DD IIII	

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UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY			
Caption in Compliance with D.N.J. LBR 9004-1(b) Law Offices of Scott J. Goldstein, LLC			
280 West Main Street			
Denville, NJ 07834			
Phone: (973) 453-2838			
Email: sjg@sgoldsteinlaw.com			
Bar Number: 16472004			
Attorney for Debtor			
In Re:	Case No.:		_
Warr, James	Chapter:	13	
	Judge:		_
1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. was paid to me within one year before the filed date of the petit of the debtor(s) in connection with this bankruptcy case is as for	tion, or agreed to be paid to me, for s		•
☑ Under D.N.J. LBR 2016-5(b), I have agreed to ac	ccept for all legal services required to	confirm a plan, subject to	the exclusions
listed below, including administrative services that m	· ·		
I understand that I must demonstrate that additional	services were unforeseeable at the ti		losure if I seek
additional compensation and reimbursement of nece		all a flat face.	
Legal services on behalf of the debtor in connection	with the following are not included in	the natiee:	
Representation of the debtor in:			
 adversary proceedings, 			
 loss mitigation/loan modification efforts, 			
 post-confirmation filings and matters bro 	ought before the Court.		
I have received:	\$1,500.00		
The balance due is:	\$3,250.00		
The balance ☑ will ☐ will not be paid thro	ough the plan.		

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		The hourly fee charged by	ept for legal services provided on behalf of the debtor in this case, an hourly fee other members of my firm that may provide services to this client range from
	paid to me in this	case post petition pursuant to D.N.J.	nderstand that I must receive the Court's approval of any fees or expenses to be LBR 2016-1.
	I have re	eceived:	
2.	The source of the	funds paid to me was:	
	☑ Debtor(s)	☐ Other (specify below)	
3.	If a balance is du	e, the source of future compensation	to be paid to me is:
	✓ Debtor(s)	☐ Other (specify below)	
-		tion with a person(s) who is not a me	on with another person(s) unless they are members of my law firm. If I have mber of my law firm, a copy of that agreement and a list of the people sharing in
	. If possible, Debtor'	s counsel will advise Debtor(s) of the	pear at hearings on their behalf in lieu of counsel retained by Debtor(s) as use of coverage counsel for any hearings prior to that hearing. Debtor(s) of firm and may or may not be compensated for their appearance.
		/s/ JW	
		Debtor(s) Initials	Debtor(s) Initials
as need			el may appear at hearings on their behalf in lieu of counsel retained by Debtor(s) e made by me, the undersigned attorney, or members of my law firm.
		Debtor(s) Initials	Debtor(s) Initials

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Date:	05/17/2023	/s/ James Warr
		Debtor
Date:		Joint Debtor
Date:	05/17/2023	/s/ Scott J Goldstein
		Debtor's attorney

6.

The Debtor(s) have reviewed this Disclosure and it is consistent with the terms of the Retainer Agreement.

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Fill in this informatio	n to identify your case	:		
Debtor 1	James		Warr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:		District of New Jersey	
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current ma	arital status?				
Married					
Not married					
	have you lived anywhe	re other than where you l	ive now?		
√ No					
Yes. List all of the pla	aces you lived in the last	3 years. Do not include w	here you live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		☐ Same as Debtor 1
		_ From			_ From
lumber Street		To	Number Street		To
City	State ZIP Code	_	City	State ZIP Code	-
			☐ Same as Debtor 1		Same as Debtor 1
lumber Street		_ From	Number Street		_ From
- Chook		To			To
City	State ZIP Code	_	City	State ZIP Code	-
			nt in a community property		munity property states a
<i>itories</i> include Arizona, ∕ I No	California, Idaho, Louisi	ana, Nevada, New Mexico	o, Puerto Rico, Texas, Wash	nington, and Wisconsin.)	
₫ NO					

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Case number (if known) _

Warr

ou are filing a joint case and you have inc	come that you receive togeth	er, list it only once under De	eblor 1.	
☑ No ☑ Yes. Fill in the details.				
Tes. Fill III the details.	Dobtov 4		Debter 2	
	Debtor 1	One as Income	Debtor 2	0
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
rom January 1 of current year until the ate you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$27,909.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
or last calendar year:	✓ Wages, commissions, bonuses, tips	\$74,828.00	☐ Wages, commissions, bonuses, tips	
YYYY	Operating a business		Operating a business	
	□6			
	Wages, commissions, bonuses, tips	\$74,959.00	■ Wages, commissions, bonuses, tips	
Or the calendar year before that: January 1 to December 31, 2021 YYYYY Did you receive any other income during lude income regardless of whether that in blic benefit payments; pensions; rental inc g a joint case and you have income that	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	us calendar years? of other income are alimonyoney collected from lawsuits	bonuses, tips Operating a business c; child support; Social Secu	
bid you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental inc g a joint case and you have income that	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	us calendar years? of other income are alimonyoney collected from lawsuits	bonuses, tips Operating a business c; child support; Social Secu	
id you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental inc g a joint case and you have income that	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	us calendar years? of other income are alimonyoney collected from lawsuits	bonuses, tips Operating a business c; child support; Social Secu	
Did you receive any other income during ude income regardless of whether that in blic benefit payments; pensions; rental income the company of the company o	bonuses, tips Operating a business If this year or the two previous come is taxable. Examples come; interest; dividends; mayou received together, list it	us calendar years? of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source	bonuses, tips Operating a business c; child support; Social Secu c; royalties; and gambling an	d lottery winnings. If you Gross Income from each source
id you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental inc g a joint case and you have income that	bonuses, tips Operating a business g this year or the two previous come is taxable. Examples come; interest; dividends; mayou received together, list it of the come is taxable. Debtor 1 Sources of income	us calendar years? of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from	bonuses, tips Operating a business c; child support; Social Secu c; royalties; and gambling an Debtor 2 Sources of income	d lottery winnings. If you Gross Income from
id you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental inc g a joint case and you have income that you have you have income that you h	bonuses, tips Operating a business g this year or the two previous come is taxable. Examples come; interest; dividends; mayou received together, list it of the come is taxable. Debtor 1 Sources of income	us calendar years? of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business c; child support; Social Secu c; royalties; and gambling an Debtor 2 Sources of income	Gross Income from each source (before deductions and exclusions)
lanuary 1 to December 31, 2021 YYYYY lid you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental inc g a joint case and you have income that	bonuses, tips Operating a business g this year or the two previous come is taxable. Examples come; interest; dividends; mayou received together, list it of the come is taxable. Debtor 1 Sources of income	us calendar years? of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business c; child support; Social Secu c; royalties; and gambling an Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions and

Debtor 1

<u>James</u>

Document Page 46 of 59 Warr Debtor 1 **James** Case number (if known) Middle Name Last Name First Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage ☐ Car Creditor's Name ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors Other _ City State ZIP Code 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **√** No Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number City ZIP Code

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Case 23-14641-SLM Doc 1 Filed 05/30/23 Entered 05/30/23 12:22:02 Desc Main Document Page 47 of 59 Warr Debtor 1 James Case number (if known) Last Name First Name Middle Name 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√** No Yes. List all payments that benefited an insider. Total amount paid Amount you still Reason for this payment Dates of payment owe Include creditor's name Insider's Name Number Street ZIP Code City State Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **✓** No Yes. Fill in the details. Status of the case Nature of the case Court or agency Pending Case title _ On appeal Court Name ☐ Concluded Number Street Case number -City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ✓ No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name

City

Number

Street

ZIP Code

State

Property was attached, seized, or levied.

Explain what happened

Property was repossessed.

Property was foreclosed.

Property was garnished.

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tor 1	<u>James</u>			
	First Name Mi	ddle Name Last Name		
	ontributions to charities more than \$600	Describe what you contributed	Date you contributed	Value
harity's Nan	me	_		
		_		
umber \$	Street	_		
ity	State ZIP Code	9		
t 6: List	t Certain Losses			
		poplyruptov or cinco you filed for bankruptov did you look	mything because of theft	fire other disaster or
nbling?	year before you filed for i	oankruptcy or since you filed for bankruptcy, did you lose a	mything because or their,	fire, other disaster, or
∕ INo				
Yes. Fill	I in the details.			
				Value of property look
	the property you lost and oss occurred	Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
			Date of your loss	value of property lost
		Include the amount that insurance has paid. List pending	Date of your loss	value of property lost
how the lo	oss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	value of property lost
how the lo		Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	value of property lost
t 7: List Within 1 yout seekin lude any a	t Certain Payments o year before you filed for l ng bankruptcy or preparin	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	ay or transfer any propert	
Within 1 yout seekin lude any a No Yes. Fill	t Certain Payments of year before you filed for lag bankruptcy or preparing torneys, bankruptcy petition the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . Transfers Dankruptcy, did you or anyone else acting on your behalf paig a bankruptcy petition? tion preparers, or credit counseling agencies for services required. Description and value of any property transferred.	ay or transfer any propert	
Within 1 yout seekin lude any a Yes. Fill	t Certain Payments of year before you filed for Ing bankruptcy or preparinattorneys, bankruptcy petion in the details. See of Scott J. Goldstein, Lie Was Paid Main Street	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Transfers Dankruptcy, did you or anyone else acting on your behalf pag a bankruptcy petition? tion preparers, or credit counseling agencies for services required. Description and value of any property transferred	ay or transfer any propertuired in your bankruptcy. Date payment or	y to anyone you consulte
Within 1 yout seekin lude any a Yes. Fill Law Office Person Who	t Certain Payments of year before you filed for land bankruptcy or preparinattorneys, bankruptcy petion in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . Transfers Dankruptcy, did you or anyone else acting on your behalf paig a bankruptcy petition? Lion preparers, or credit counseling agencies for services required property transferred Description and value of any property transferred C \$1500 legal fess, \$313 filing fee, \$77 CCC, DE, Credit	ay or transfer any propertuired in your bankruptcy. Date payment or transfer was made	y to anyone you consulted
Within 1 yout seekin lude any a No Yes. Fill Law Office Person Who 280 West I Jumber S	t Certain Payments of year before you filed for land bankruptcy or preparing bankruptcy petricular in the details. Ses of Scott J. Goldstein, Lind Was Paid Main Street NJ 07834	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . Transfers Dankruptcy, did you or anyone else acting on your behalf pang a bankruptcy petition? Ition preparers, or credit counseling agencies for services required property transferred Description and value of any property transferred Report, \$110 postage and office costs	ay or transfer any propertuired in your bankruptcy. Date payment or transfer was made	y to anyone you consulted
Within 1 yout seekin elude any a No Yes. Fill Law Office Person Who 280 West Number State of the Number St	t Certain Payments of the Cert	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . Transfers Dankruptcy, did you or anyone else acting on your behalf pang a bankruptcy petition? Ition preparers, or credit counseling agencies for services required property transferred Description and value of any property transferred Report, \$110 postage and office costs	ay or transfer any propertuired in your bankruptcy. Date payment or transfer was made	y to anyone you consulted
t 7: List Within 1 yout seekin slude any a library No Yang Yes. Fill Law Office Person Who 280 West I Number S Denville, No	t Certain Payments of year before you filed for land bankruptcy or preparing bankruptcy petricular in the details. Ses of Scott J. Goldstein, Lind Was Paid Main Street NJ 07834	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . Transfers Dankruptcy, did you or anyone else acting on your behalf pang a bankruptcy petition? Ition preparers, or credit counseling agencies for services required property transferred Description and value of any property transferred Report, \$110 postage and office costs	ay or transfer any propertuired in your bankruptcy. Date payment or transfer was made	y to anyone you consulted

Case 23-14641-SLM Doc 1 Filed 05/30/23 Entered 05/30/23 12:22:02 Desc Main Document Page 50 of 59 Warr Debtor 1 **James** Case number (if known) _ Last Name First Name Middle Name 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **✓** No Yes. Fill in the details. Description and value of property Describe any property or payments Date transfer was transferred received or debts paid in exchange made Person Who Received Transfer Number Street State ZIP Code Person's relationship to you -19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **√**No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust ___

	ddle Name Last Name			
rt 8: List Certain Financial Ad	ccounts, Instruments, Safe Depos	it Boxes, and Storage	Units	
r transferred?	pankruptcy, were any financial accounts ket, or other financial accounts; certificate other financial institutions.			
✓No				
Yes. Fill in the details.				
Tes. Fill in the details.				
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution				
	XXXX	☐ Checking		
Number Street		Savings		
vulliber Street		■ Money market		
	<u> </u>	Brokerage		
		Other		
City State ZIP Code				
Yes. Fill in the details.				
	Who else had access to it?	Describe the co	ntents	Do you still have it?
Name of Financial Institution	Name			☐ No ☐ Yes
Number Street	Number Street			
	City State ZIP Cod	de		
City State ZIP Code	9			
Have you stored property in a stor	age unit or place other than your home	within 1 year before you fi	iled for bankruptcy?	
√ No				
Yes. Fill in the details.				
	Who else has or had access to it	P Describe the co	ntents	Do you still have it?
				□No
Name of Storage Facility	Name			Yes
Number Street	Number Street			
	City State ZIP Cod	de		
City State ZIP Code				

Debtor 1

Document Page 52 of 59 Debtor 1 James Warr Case number (if known) Middle Name First Name Last Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ✓ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street State **ZIP Code** City State **ZIP Code** Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **✓** No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **✓** No Yes. Fill in the details.

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First Name of site er Street	Govern	Last Name nmental unit nental unit Street	Environmental law, if you know it	t Date of notice
er Street	Governm	nental unit		Date of Hotice
er Street	Number		_	
		Street		
		Street		
St	City			
St	City	20 to 1 TIP 0		
St		State ZIP Cod	ae	
	ate ZIP Code			
you been a part		istrative proceeding ur	nder any environmental law? Include settle	ements and orders.
s. Fill III the detail		or agency	Nature of the case	Status of the case
	Court	br agency	nature of the case	Status of the case
title				Pending
	Court Na	ime		☐ On appeal
	N	- Change		☐ Concluded
	Number	Street		
umber	City	State ZIP Cod	de	
in 4 years before A sole proprieto A member of a	or or self-employed in a tra	, did you own a busines ade, profession, or other LLC) or limited liability pa	ss or have any of the following connection activity, either full-time or part-time artnership (LLP)	us to any business?
An owner of at None of the abo	etor, or managing executive least 5% of the voting or e	equity securities of a corp		
An officer, direct An owner of at None of the abo	least 5% of the voting or e	equity securities of a corp	usiness.	
An officer, direct An owner of at None of the abo	least 5% of the voting or e	equity securities of a corp	usiness. Employer Identifi	cation number ocial Security number or ITIN.
An officer, direct An owner of at None of the abo	least 5% of the voting or e	equity securities of a corp	usiness Employer Identifi Do not include So	ocial Security number or ITIN.
An officer, directly an owner of at a line of the about	least 5% of the voting or e	equity securities of a corp	usiness. Employer Identifi	ocial Security number or ITIN.
An officer, direct An owner of at None of the abo	least 5% of the voting or enve applies. Go to Part 12. apply above and fill in the content of the property of	equity securities of a corp	usiness. Employer Identification Do not include Solution EIN:	ocial Security number or ITIN.
A member of a	limited liability company (L	LLC) or limited liability pa	partnership (LLP)	

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ebtor 1	James		Warr	Case number (if known)
,5101 1	First Name	Middle Nan		
28 Within	2 years before you f	filed for hankru	intov, did voji give a financia	al statement to anyone about your business? Include all financial institutions,
	or other parties.	inca for barriera	proy, and you give a interior	a statement to anyone about your basiness. Instate an intanstal institutions,
√ No				
	Fill in the details belo	114/		
_ 100.	i iii iii tiie detailo bele			
			Date issued	
Name		M	M / DD / YYYY	
Number	Street			
City	State	ZIP Code		
and correc	ct. I understand that	making a false	statement, concealing prop	ttachments, and I declare under penalty of perjury that the answers are true perty, or obtaining money or property by fraud in connection with a up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
X <u>/s/</u>	James Warr			
Sign	nature of James Warr	, Debtor 1		
Date	e <u>05/17/2023</u>			
Did you at	tach additional page	e to your State	emont of Einancial Affairs fo	or Individuals Filing for Bankruptcy (Official Form 107)?
-	itach additional page	s to your state	enieni di Financiai Anans id	Tindividuals Filling for Bankruptey (Official Forth 107):
√ No				
Yes				
	_			
	ay or agree to pay so	omeone who is	not an attorney to help you	fill out bankruptcy forms?
Did you p a √ 1 No	ay or agree to pay so	omeone who is	not an attorney to help you	fill out bankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	James		Warr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: District of New Jersey					
Case number (if known)					

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☑3. The commitment period is 3 years.
4. The commitment period is 5 years.
☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate	Your	Average	Monthly	Income
I GI t I.	oaloalato	. Oai	, worago	.vioi iti ii y	111001110

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	commissions (bet	ore all	\$6,627	83 \$0.00
3.	Alimony and maintenance payments. Do not include pay	yments from a spo	use.	\$0	.00 \$0.00
4.	All amounts from any source which are regularly paid for your dependents, including child support. Include regularly unmarried partner, members of your household, your deproommates. Do not include payments from a spouse. Do on line 3.	ar contributions fro pendents, parents,	om an and		.00 \$0.00
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	- \$0.00 -	\$0.00		
	Net monthly income from a business, profession, or farm	\$0.00	ψ0.00	Copy here → \$0	00 \$0.00
6.	Net income from rental and other real property	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	- \$0.00 -	\$0.00		
	Net monthly income from rental or other real property	\$0.00	ψ0.00	Copy here →\$0.	.00 \$0.00

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Debtor 1	James	Arith M	Warr		C	ase numbe	er (if known)		
	First Name	Middle Name	Last Name		Column A Debtor 1	ı	Column B Debtor 2 or non-filing spou	se	
7. Interest, di	ividends, and royal	ties				\$0.00		0.00	
8. Unemploy	ment compensatio	n				\$0.00	\$	0.00	
Do not ent	er the amount if you	contend that the amo	unt received was a benefit	under		<u> </u>			
the Social	Security Act. Instea	d, list it here:							
For yo	u		<u> </u>	\$0.00					
For yo	ur spouse			51,463.27					
under the sinclude any States Gov death of a under chap exceed the under any 10. Income front include a victim of terrorism;	Social Security Act. y compensation, per vernment in connect member of the unificater 61 of title 10, the eamount of retired provision of title 10 rom all other source the any benefits recelled any benefits recelled any crime, a criring or compensation, p	Also, except as stated nsion, pay, annuity, or tion with a disability, commed services. If you en include that pay on pay to which you would other than chapter 61 tes not listed above. Spived under the Social Spived under the manity, opension, pay, annuity, opension, pay, annuity, or	pecify the source and amo Security Act; payments rec r international or domestic or allowance paid by the Un	not red ability, or aid not tired unt. Do eived as		<u>60.00</u>	<u></u> \$	0.00	
Total amou	a member of the unipage and put the to unts from separate p your total average hen add the total for	formed services. If nectal below. pages, if any. monthly income. Add or Column A to the total	ombat-related injury or discessary, list other sources of the sour	on a	\$6,62	7.83	+ \$0	0.00	= \$6,627.83 Total average monthly income
12. Copy yo u	ır total average mo	nthly income from line	• 11						\$6,627.83
12 Calculate	the marital adjustr	nent Chack and						,	
_	not married. Fill in 0								
		oouse is filing with you.	Fill in 0 below						
		oouse is not filing with							
Fill in the	e amount of the inco	ome listed in line 11, Co	olumn B, that was NOT reg tax liability or the spouse's						
additiona	al adjustments on a	separate page.	and the amount of income	devoted to each	ch purpose. If	fnecessary	, list		
If this ad	ljustment does not a	apply, enter 0 below.				1			
Total					\$0.00	Copy he	re. $ ightarrow$		\$0.00
14. Your curr	ent monthly incom	e. Subtract the total in	line 13 from line 12.						\$6,627.83

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Debtor 1	James	Warr	Case number (if known)		
	First Name	Middle Name Last N	ame		
15. Calculate	your current mont	thly income for the year. Follow the	ese steps:		
15a. Co	py line 14 here →.			_	\$6,627.83
Mul	tiply line 15a by 12 ((the number of months in a year).			x 12
15b. The	e result is your curre	ent monthly income for the year for	this part of the form	_	\$79,533.96
16. Calculate	the median family	income that applies to you. Follow	v these steps:		
	in the state in which		New Jersey		
16b. Fill	in the number of pe	eople in your household.	2		
16c. Fill	in the median family	y income for your state and size of	household		\$99,056.00
		ole median income amounts, go onl n. This list may also be available at	ne using the link specified in the separa he bankruptcy clerk's office.	te	
17. How do t	he lines compare?				
17a. 🔽	Line 15b is less the U.S.C. § 1325(b)	han or equal to line 16c. On the top (3). Go to Part 3. Do NOT fill out <i>C</i> a	of page 1 of this form, check box 1, Disaculation of Your Disposable Income (O	posable income is not determined unfficial Form 122C–2).	nder 11
17b. 🖵	1325(b)(3). Go to		of this form, check box 2, <i>Disposable in</i> our Disposable Income (Official Form		
Part 3: Cald	•	nmitment Period Under 11 U.	S.C. §1325(b)(4)		
40. Camuus	total average was	math by in a case of trains line 44			
10. Copy you	ir total average illo			-	\$6,627.83
calculatin			our spouse is not filing with you, and you allows you to deduct part of your spous		
19a. If the	marital adjustment	does not apply, fill in 0 on line 19a.			\$0.00
19b. Subt	ract line 19a from li	ne 18.		_	\$6,627.83
20. Calculate	your current mont	thly income for the year. Follow the	ese steps.		
20a Conv	ine 19h				\$6,627.83
, ,		er of months in a year).		x 1:	
20b. The re	sult is your current	monthly income for the year for this	part of the form.	_	\$79,533.96
00 0					\$99,056.00
20c. Copy t	ne median family in	icome for your state and size of not	sehold from line 16c		
	he lines compare?				
Line 20 The co	b is less than line 2 mmitment period is	Oc. Unless otherwise ordered by the 3 years. Go to Part 4.	e court, on the top of page 1 of this form	ı, check box 3,	
		qual to line 20c. Unless otherwise onent period is 5 years. Go to Part 4.	ordered by the court, on the top of page	1 of this form,	
Part 4: Sign	n Below				
By signing	here, under penalty	y of perjury I declare that the inform	ation on this statement and in any attac	hments is true and correct.	
X /s	/ James Warr				
Sig	nature of Debtor 1				
Da	te <u>05/17/2023</u> MM/ DD/ YYYY				
-		ill out or file Form 122C–2. rm 122C–2 and file it with this form	On line 39 of that form, copy your curre	ent monthly income from line 14 abov	ve.

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IN THE UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

N RE: Warr, James		CASE NO
		CHAPTER 13
	VEF	RIFICATION OF CREDITOR MATRIX
The above named	Debtor hereby verifies that the atta	ached list of creditors is true and correct to the best of his/her knowledge.
Date05/17/202	3 Signature	/s/ James Warr James Warr, Debtor

BANK OF AMERICA

Attn: Bankruptcy PO BOX 982238 EL PASO, TX 79998

Barclays Bank Delaware

Attn: Bankruptcy PO Box Box 8801 Wilmington, DE 19899

CITIBANK

Attn: Centralized Bankruptcy PO Box 790034 Saint Louis, MO 63179

DISCOVER BANK

Attn: Bankruptcy PO Box 30939 Salt Lake City, UT 84130

ELAN FINANCIAL SERVICE

PO BOX 790084 SAINT LOUIS, MO 63179

FNB OMAHA

PO BOX 3412 OMAHA, NE 68103

RBS CITIZENS NA

6 CORPORATE DR SHELTON, CT 06484